(b) if so, the details thereof;

(c) if not, the reasons therefor; and

(d) the steps taken by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (d) There is not Central Scheme in the Ninth Plan for providing health care services at Schools. The State Government of Arunachal Pradesh also does not have any such scheme.

Asthma vaccine

2309. PROF. M. SANKARALINGAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news-item captioned, Singapore scientists create asthma vaccine from dust mite, which appeared in the Indian Express, dated 5th July, 2001;

(b) if so, the reaction of his Ministry;

(c) whether, according to WHO estimates, between 100 and 150 million people worldwide suffer from asthma;

(d) the percentage of population affected in India; and

(e) the details of schemes and programmes to contain and control asthma?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Yes Sir. According to Vallabhai Patel Chest Institute, Scientists from the National University of Singapore have developed a vaccine for controlling asthma using a gene from the dust mite. The dust mite is one of the commonest causes of allergic asthma. It is claimed to be the first-ever genetic vaccine for prevention of allergic asthma. The vaccine has so far been tested only in mice and rates and appears to be successful. No human studies have been carried out so far.

(c) to (e) According to WHO estimates, between 100 and 150 million people worldwide suffer from asthma. It is estimated that approximately 3-5 percent of the individual in India suffers from the bronchial asthma. Majority of hospitals, both in public and private sector, is equipped to treat asthma. In addition, several refferal centres are there in different cities where these patients may be referred for specialist consultations.

ICMR have established a Task Force on Asthma wherein several schemes to study the etiopathogenesis of asthma are being initiated.

Amendment in Drugs and Cosmetics Act relating to Mood donation by prisoners

2310. PROF. M. SANKARALINGAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that an amendment was made in the Drugs and Cosmetics Act by his Ministry about two years ago banning donation of blood by prisoners, drug addicts and people having multiple sexual partners;

(b) if so, how can blood donation by Tihar prisoners be supported;

(c) whether it is also a fact that NHRC and Indian Red Cross Society rejected the blood donation by prisoners; and

(d) if so, the reasons behind such a rejection?

THE MINISTER OFSTATE IN THE MINISTRY OF HEALTH ANDFAMILY WELFARE (SHRI A. RAJA): (a) to (d) Yes, Sir. The provisions of Drugs & Cosmetics Act 1945 as amended on 5th April, 1999 prohibits collection of blood from jail inmates, drug addicts and people having multiple sexual partners. This is one of the conditions laid down for donation of blood and is airmed at ensuring highest standards of safety in Blood Transfusion Services.

It is well known fact from studies conducted in India and all over the world that prison inmates have much higher levels of HIV infection, Sexually Transmitted Infection prevalence, Drug abuse practices and other risk behaviours, when compared to the general population. Although, all blood units collected are tested for blood borne infections, the phenomenon of 'window period' where infections in their early stages are not detectable by the tests used, makes the process of proper donor selection crucial.

Keeping in view the above mentioned legislation and the reasons behind prohibiting collection of blood from jail inmates, the Indian Red Cross Society has rejected proposals for organising Blood Donation Camps in Prisons.